



FLORIDA DEPARTMENT of STATE

RICK SCOTT
Governor

KEN DETZNER
Secretary of State

October 5, 2018

Honorable R.J. Larissa
State Attorney, 7th Judicial Circuit
251 N Ridgewood Avenue
Daytona Beach, Florida L 32114

Re: Elections Fraud Complaints No. 18-83, 84, and 88

Dear Mr. Larissa:

I am referring the enclosed elections fraud complaints to you pursuant to section 97.012(15), Florida Statutes, which charges the Department of State with conducting preliminary investigations of elections fraud and reporting the findings to the appropriate state attorney's office.

The three complainants from Volusia County allege that someone falsely signed their names on voter registration forms. It appears the allegations have merit. Information obtained from the Volusia County Supervisor of Elections revealed that the applications were submitted to her office by a third-party voter registration organization, Florida Conservation Voters Education Fund, whose address is 117 S. Gadsden Street Tallahassee, Florida 32301.

False swearing on a voter registration application and submission of false voter registration information are violations of section 104.011, Florida Statutes.

Please find enclosed the elections fraud complaints and relevant documents.

Sincerely,

A handwritten signature in black ink, appearing to read "Ashley E. Davis", with a stylized flourish at the end.

Ashley E. Davis
Deputy General Counsel

Enclosures

cc: Volusia County Supervisor of Elections Lisa Lewis

ELECTIONS FRAUD COMPLAINT

Voter Fraud Hotline Telephone number 1-877-868-3737

Under section 97.012(15), Florida Statutes, the Department of State has authority to conduct preliminary investigations into any allegations of irregularities or fraud involving voter registration or voting, or candidate or issue petition activities. The Department may then report its findings to the Office of Statewide Prosecution or to the State Attorney for the judicial circuit in which the alleged violation occurred for prosecution, where warranted.

Please return the completed complaint form to: *Florida Department of State, Office of the General Counsel*
1st Floor, R.A. Gray Building
500 S. Bronough Street
Tallahassee, Florida 32399-0250

You will receive a written response from the Department of State at the end of its investigation.

PERSON BRINGING COMPLAINT

Name Jeffery Whitaker Day Phone 386-734-0828 Evening Phone 386-746-9382
Address 305 E 2nd Ave City Pierson
County Volusia State FL Zip Code 32180
E-mail Address whitakerways@gmail.com

PERSON OR ENTITY AGAINST WHOM COMPLAINT IS BROUGHT (limit one person/entity per form)

Name Unknown Work Phone _____
Person's title of office or position held or sought if applicable _____
Name of Governmental Office or Private Entity/Office _____
Address _____ City _____
County _____ State _____ Zip Code _____

Have you filed this complaint with the (check all that apply):

RECEIVED

SEP 25 2018

Office of the General Counsel

State Attorney's Office

☐ Yes ☒ No

Office of Statewide Prosecution

☐ Yes ☒ No

Florida Department of Law Enforcement

☐ Yes ☒ No

Florida Elections Commission

☒ Yes ☐ No

Florida Commission on Ethics

☐ Yes ☒ No

VIOLATION: If you believe any irregularities or fraud involving voter registration or voting, or candidate or issue petition activities have been committed, please state the specific acts committed by the person or entity named in this complaint:

Someone filed in my name to have my party changed.

STATEMENT OF FACTS

State in your own words exactly what happened. Please include details such as what happened, where the events or acts happened, when they happened (including dates and times), what you were told, who spoke to you and to whom you spoke, what you agreed or did not agree to, and who else saw or knows about what happened. Include the names, addresses and phone numbers of relevant persons. Also, give any reasons why you feel that the person or entity against whom you have brought this complaint knew that his or her actions were wrongful. The more specific information that you provide to us, the better we will be able to assist you.

I received a letter in the mail stating that the Supervisor of elections County of Volusia received correspondence from me to change my name or party. I did not make this request. I called the

Supervisor of Elections of Volusia County and was told that they received a signed request, but the signature did not match my signature on file. Again, I did not send the request for change. I called

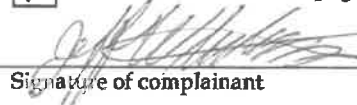
the Florida Voter Fraud and was told that the email filed on the form did not match my email either. I do not know who filed for the change. I am the third person in my household to have voter issues

instigated by an unknown party this year. They are filing forms as well; Brooke Whitaker and Mya

Cloud. I have included the letter I received from the elections office



Check here if additional pages or documents are attached.



Signature of complainant

9/18/2018

Date Signed

Jeffery Whitaker

Print or type name of complainant

It is a third-degree felony for any person to knowingly and willfully make any false, fictitious, or fraudulent statement or representation in any matter within the jurisdiction of the Department of State. See § 817.155, Fla. Stat.

THIS COMPLAINT IS NOT CONFIDENTIAL. ONCE IT IS FILED WITH THE DEPARTMENT OF STATE, IT BECOMES A PUBLIC RECORD.



Lisa Lewis
Supervisor of Elections
County of Volusia

September 12, 2018

Jeffery W. Whitaker
305 E 2nd AVE
Pierson FL 32180

Dear Registered Voter:

We recently received correspondence from you to change either your name or party. As per Florida Statute 97.1031 we must have a signed written notice that contains your date of birth or voter registration number.

Please complete this form and return to us in the postage-paid envelope enclosed.

Sincerely,

Lisa Lewis
Supervisor of Elections

Current name: **Jeffery W. Whitaker**

Voter ID: [108559437]

Current party: **DEM**

Date of Birth _____

Please change my name to _____

Please change my party to _____

Residence address _____

Mailing address _____

Voter signature _____ Date _____

Historic Courthouse
125 West New York Avenue, DeLand, FL 32720-5415
(386) 736-5930 • (386) 254-4690 • (386) 423-3311 • FAX (386) 822-5715
www.volusiaelections.org

Para información en español, llame al 386-736-5930.

If your signature has changed, please update your signature by completing a new Florida voter registration application. It is important to keep your signature updated, so that ballots and/or petition signatures can be counted.

ELECTIONS FRAUD COMPLAINT

Voter Fraud Hotline Telephone number 1-877-868-3737

Under section 97.012(15), Florida Statutes, the Department of State has authority to conduct preliminary investigations into any allegations of irregularities or fraud involving voter registration or voting, or candidate or issue petition activities. The Department may then report its findings to the Office of Statewide Prosecution or to the State Attorney for the judicial circuit in which the alleged violation occurred for prosecution, where warranted.

Please return the completed complaint form to: *Florida Department of State, Office of the General Counsel*
1st Floor, R.A. Gray Building
500 S. Bronough Street
Tallahassee, Florida 32399-0250

You will receive a written response from the Department of State at the end of its investigation.

PERSON BRINGING COMPLAINT

Name Brooke Whitaker Day Phone 386-734-0828 Evening Phone 386-479-6963
Address 305 E 2nd Ave City Pierson
County Volusia State FL Zip Code 32180
E-mail Address whitakerways@gmail.com

PERSON OR ENTITY AGAINST WHOM COMPLAINT IS BROUGHT (limit one person/entity per form)

Name Unknown Work Phone _____
Person's title of office or position held or sought if applicable _____
Name of Governmental Office or Private Entity/Office _____
Address _____ City _____
County _____ State _____ Zip Code _____

Have you filed this complaint with the (check all that apply):

RECEIVED

SEP 25 2018

Office of the General Counsel

State Attorney's Office

☐ Yes ☒ No

Office of Statewide Prosecution

☐ Yes ☒ No

Florida Department of Law Enforcement

☐ Yes ☒ No

Florida Elections Commission

☒ Yes ☐ No

Florida Commission on Ethics

☐ Yes ☒ No

VIOLATION: If you believe any irregularities or fraud involving voter registration or voting, or candidate or issue petition activities have been committed, please state the specific acts committed by the person or entity named in this complaint:

Someone filed in my name to register to vote. I am already a registered voter in Volusia County.

STATEMENT OF FACTS

State in your own words exactly what happened. Please include details such as what happened, where the events or acts happened, when they happened (including dates and times), what you were told, who spoke to you and to whom you spoke, what you agreed or did not agree to, and who else saw or knows about what happened. Include the names, addresses and phone numbers of relevant persons. Also, give any reasons why you feel that the person or entity against whom you have brought this complaint knew that his or her actions were wrongful. The more specific information that you provide to us, the better we will be able to assist you.

I received a letter in the mail saying that the Supervisor of Elections County of Volusia was unable to

validate my information and so was unable to register me to vote. I did not initiate this request. I have, and have had since 1996, a valid Volusia County voter ID. I called and was told that the

Volusia County office had several of these unauthorized requests and for me to send it back stating

I did not initiate the request and was told that the Volusia County elections office was going to forward them to the state attorney. Whoever filed the request did not have my correct social security

number, but used my name and address. I have included the letter I received from the elections

office.



Check here if additional pages or documents are attached.



Signature of complainant

9/18/2018

Date Signed

Brooke Whitaker

Print or type name of complainant

It is a third-degree felony for any person to knowingly and willfully make any false, fictitious, or fraudulent statement or representation in any matter within the jurisdiction of the Department of State. See § 817.155, Fla. Stat.

THIS COMPLAINT IS NOT CONFIDENTIAL. ONCE IT IS FILED WITH THE DEPARTMENT OF STATE, IT BECOMES A PUBLIC RECORD.



Lisa Lewis
Supervisor of Elections
County of Volusia

[125758217]
Brooke Whitaker
305 E 2Nd Ave
Pierson FL 32180

June 12, 2018

*This is not
my application.
I already have a
voter id since 2006 1996.
Thank you,
Brooke Whitaker*

Dear Brooke Whitaker :

As required by the Florida Election Code, the Florida Division of Elections has attempted to verify the Florida driver's license number, Florida identification card number, or last four digits of the social security number provided on your voter registration application. The Division of Elections has notified us that it was unable to verify the Florida driver's license, Florida identification card, or last four digits of the social security number you provided on the voter registration application.

To become an active voter you will need to provide this office with a copy of your Florida driver's license or Florida identification card, or, if you do not have either, your social security card. You may provide this copy by mail, fax or by email. Or, you may bring your Florida driver's license, Florida identification card, or social security card to this office in person. The address, fax number and e-mail address of this office are at the bottom of this letter.

Please note that Florida law provides an exemption from the public records law for your driver's license number, identification card or social security number. Therefore, your number will not become a public record and will remain confidential.

If you do not provide the necessary evidence prior to voting, you may not cast a regular ballot; however, you will be provided a provisional ballot. The provisional ballot will be counted if you provide the evidence described above to this office no later than 5 p.m. of the second day following the election.

~~If you have any questions, please do not hesitate to contact the department.~~

Sincerely,

Lisa Lewis
Supervisor of Elections

Historic Courthouse
125 West New York Avenue, DeLand, FL 32720-5415
(386) 736-5930 • (386) 254-4690 • (386) 423-3311 • FAX (386) 822-5715
www.volusiaelections.org

Para información en español, llame al 386-736-5930.

If your signature has changed, please update your signature by completing a new Florida voter registration application. It is important to keep your signature updated, so that ballots and/or petition signatures can be counted.

ELECTIONS FRAUD COMPLAINT

Voter Fraud Hotline Telephone number 1-877-868-3737

Under section 97.012(15), Florida Statutes, the Department of State has authority to conduct preliminary investigations into any allegations of irregularities or fraud involving voter registration or voting, or candidate or issue petition activities. The Department may then report its findings to the Office of Statewide Prosecution or to the State Attorney for the judicial circuit in which the alleged violation occurred for prosecution, where warranted.

Please return the completed complaint form to: *Florida Department of State, Office of the General Counsel*
1st Floor, R.A. Gray Building
500 S. Bronough Street
Tallahassee, Florida 32399-0250

You will receive a written response from the Department of State at the end of its investigation.

PERSON BRINGING COMPLAINT

Name Mya Cloud Day Phone _____ Evening Phone 386-479-6963
Address 305 E 2nd Ave City Pierson
County Volusia State FL Zip Code 32180
E-mail Address whitakerways@gmail.com

PERSON OR ENTITY AGAINST WHOM COMPLAINT IS BROUGHT (limit one person/entity per form)

Name Unknown Work Phone _____
Person's title of office or position held or sought if applicable _____ Name of Governmental Office or Private Entity/Office _____
Address _____ City _____
County _____ State _____ Zip Code _____

Have you filed this complaint with the (check all that apply):

State Attorney's Office

☐ Yes ☒ No

Office of Statewide Prosecution

☐ Yes ☒ No

Florida Department of Law Enforcement

☐ Yes ☒ No

Florida Elections Commission

☒ Yes ☐ No

Florida Commission on Ethics

☐ Yes ☒ No

RECEIVED

OCT 11 2018

Office of the General Counsel

VIOLATION: If you believe any irregularities or fraud involving voter registration or voting, or candidate or issue petition activities have been committed, please state the specific acts committed by the person or entity named in this complaint:

Someone filed in my name to register to vote. I have not requested or filed any forms to become a voter.

STATEMENT OF FACTS

State in your own words exactly what happened. Please include details such as what happened, where the events or acts happened, when they happened (including dates and times), what you were told, who spoke to you and to whom you spoke, what you agreed or did not agree to, and who else saw or knows about what happened. Include the names, addresses and phone numbers of relevant persons. Also, give any reasons why you feel that the person or entity against whom you have brought this complaint knew that his or her actions were wrongful. The more specific information that you provide to us, the better we will be able to assist you.

I received a letter in the mail saying that the Supervisor of Elections County of Volusia was unable to validate my information and so was unable to register me to vote. I did not initiate this request. Whoever filed the request did not have my correct social security number and an incorrect date of birth, but used my name and address. I have included the letter I received from the elections

office



Check here if additional pages or documents are attached.


Signature of complainant

9/18/2018

Date Signed

Mya Cloud

Print or type name of complainant

It is a third-degree felony for any person to knowingly and willfully make any false, fictitious, or fraudulent statement or representation in any matter within the jurisdiction of the Department of State. See § 817.155, Fla. Stat.

THIS COMPLAINT IS NOT CONFIDENTIAL. ONCE IT IS FILED WITH THE DEPARTMENT OF STATE, IT BECOMES A PUBLIC RECORD.



[125894528]

Mya Cloud
305 E 2Nd Ave
Pierson FL 32180

Dear Mya Cloud :

As required by the Florida Election Code, the Florida Division of Elections has attempted to verify the Florida driver's license number, Florida identification card number, or last four digits of the social security number provided on your voter registration application. The Division of Elections has notified us that it was unable to verify the Florida driver's license, Florida identification card, or last four digits of the social security number you provided on the voter registration application.

To become an active voter you will need to provide this office with a copy of your Florida driver's license or Florida identification card, or, if you do not have either, your social security card. You may provide this copy by mail, fax or by email. Or, you may bring your Florida driver's license, Florida identification card, or social security card to this office in person. The address, fax number and e-mail address of this office are at the bottom of this letter.

Please note that Florida law provides an exemption from the public records law for your driver's license number, identification card or social security number. Therefore, your number will not become a public record and will remain confidential.

If you do not provide the necessary evidence prior to voting, you may not cast a regular ballot; however, you will be provided a provisional ballot. The provisional ballot will be counted if you provide the evidence described above to this office no later than 5 p.m. of the second day following the election.

If you have any questions, please do not hesitate to contact the department.

Sincerely,

Lisa Lewis
Supervisor of Elections

Historic Courthouse
125 West New York Avenue, DeLand, FL 32720-5415
(386) 736-5930 • (386) 254-4690 • (386) 423-3311 • FAX (386) 822-5715
www.volusiaelections.org

Para información en español, llame al 386-736-5930.

If your signature has changed, please update your signature by completing a new Florida voter registration application. It is important to keep your signature updated, so that ballots and/or petition signatures can be counted.

Lisa Lewis
Supervisor of Elections AUG 01 2018
County of Volusia

Cancelled

Mya did not initiate this. She is not 18 years of age. This was not requested or applied for by Mya K. Cloud.

*Brody Whitaker 2/20/18
mother of minor Mya Cloud*